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DECLARATION FOR UTILITY OR	Attorney Docket	Number	MET 008						
DESIGN	First Named Inve	ntor	Alireza Shekarriz						
PATENT APPLICATION	COM	PLETE IF	KNOWN						
(37 CFR 1.63)	Application Numb	per /							
<b>D</b>	Filing Date	March 19, 2004							
☑ Declaration ☐ Declaration Submitted OR Submitted after Initial	Group Art Unit	Unkn	own						
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	Unkn	own						
			· · · · · · · · · · · · · · · · · · ·						
As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated	below next to my name	ı.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural									
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
MICROIMPACTOR SYSTEM HAVING OPTIMIZED IMPACTOR SPACING									
	(Title of the Invention)								
	the specification of which								
is attached hereto OR as United States Application Number or PCT International									
was filed on (MM/DD/YYYY) (if applicable).									
Application Number and was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or									
PCT international filing date of the continuation-in-part applic		foreign ope	lientian(s) for natant or importants						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s) Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claime	Certifled Copy Attached? d YES NO						
		0000							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s) Filing Date (MM/DD/YYYY)									

numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]
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## **DECLARATION** — Utility or Design Patent Application

l Direct all correspondence to:	ustomer Number r Bar Code Label			] OR [   0	Correspondence address below			
Name Gary C. Cohn PLLC								
Address 4010 Lake Washington Blvd., NE								
Address Suite 105								
CHy Kirkland			State V	VA.	2IP 98033			
Country U.S.A. Telephone (425) 57			76-1656 F		Fax (425) 576-1756			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [If any])  Alireza Family Name Shekarriz or Surname								
Inventor's Signature Sheliaming Date 3/22/04								
Residence: City Lake Oswego State		Country		Citizenship US				
Mailing Address 17488 Mardee Avenue								
Mailing Address								
City Lake Oswego	State OR		ZIP 97035-5471		Country US			
NAME OF SECOND INVENTOR:								
Given Name Danielle Lynn Family Name Taylor (first and middle [if any]) or Surname								
Inventor's Danielly Taylor				Date 3/22/04				
Residence: City Portland	<i>U</i>	State OR		Country US	Citizenship US			
Mailing Address 4415 NE 12th Ave.								
Malling Address								
City Portland	OR State		ZIP 97211		Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

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## **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname					
Joseph Gerard	Birmingham							
Inventor's Joseph J. Burning			~	Date 3/22/04				
Lake Oswego Residence: City	OR V	c	US ountry		US Citizenship			
768 North Shore Road Mailing Address								
Mailing Address								
City Lake Oswego	State OR		97034 ZIP	Countr	y US			
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any]) Family Name or Surname					umame			
	·				· · · · · · · · · · · · · · · · · · ·			
Inventor's Signature					Date			
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		ZIP	Cou	intry			
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])		Family Name or Sumame						
Inventor's Signature	<b>,</b>				Date			
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		ZIP		ountry			

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